City of Rockford, Illinois

Community & Economic Development Department Construction and Development Services 425 East State Street, Rockford, IL 61104 Phone: (779) 348-7158 Fax: (815) 967-4243

Web: www.rockfordil.gov



MECHANICAL LICENSE EXAMINATION APPLICATION

2020 SCHEDULE of APPLICATION FILING & EXAMINATION DATES

FILING DEADLINE:	TESTING DATE:
(First Thursday of each Month by 5:00PM)	(subject to Mechanical Board Approval) (Second Thursday of each Month at Noon)
January 2, 2020	January 9, 2020
February 6, 2020	February 13, 2020
March 5, 2020	March 12, 2020
April 2, 2020	April 9, 2020
May 7, 2020	May 14, 2020
June 4, 2020	June 11, 2020
July 2, 2020	July 9, 2020
August 6, 2020	August 13, 2020
September 3, 2020	September 10, 2020
October 1, 2020	October 8, 2020
November 5, 2020	November 12, 2020
December 3, 2020	December 10, 2020
January 7, 2021	January 14, 2021

***Upon submittal of an application, the Mechanical Board will review the application and determine if the applicant has met the requirements set forth in the Mechanical Code Amendments to take the applied for license examination.

If you have any questions, please call the Construction and Development Services office at (779) 348-7158.

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CONSTRUCTION AND DEVELOPMENT SERVICES DIVISION

Mechanical License Examination Application

To obtain a mechanical license from the City of Rockford, you must qualify and be approved by the Mechanical Board to take the mechanical examination and shall pass the examination as provided by the Mechanical Board. The following qualifications and requirements are from the 2015 International Code Family with amendments including the International Mechanical Code as amended and International Fuel Gas Code as amended, and the International Residential Code as amended:

All applicants for a license shall be of legal age, and shall:

- 1. MANDATORY that the applicant have had at least five (5) years of experience in the trade for the class of license he is applying for or;
- 2. have a degree in related mechanical technologies from an accredited university or college for the class of license he is applying for plus one (1) year of practical experience in that class or;
- 3. have completed a registered apprenticeship program recognized by the Mechanical Board for the class of license that he is applying for,

Applications for a mechanical license shall be filed with the code official on the second Thursday of each month by 5:00pm.

Examinations for licenses are given by the Mechanical Inspector, Stewart Johnson on the second Thursday of every month. The applicant must test within 90 calendar days of approval to test or will have to re-apply. Forty-eight hour notice of intent to take the license exam is required. If testing for more than one exam, each test may be given on different days; as each test requires a 2 hour time frame.

This license examination application must be notarized.

Return Applications to:
Construction and Development Services
Attention: Christina Hargrove
425 East State Street
Rockford, IL 61104
Phone: (779) 348-7158

Fax: (815) 967-4243

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Classes of Mechanical Licenses

- Class A license shall be issued to a person desiring to enter into the business of installing, altering, or repairing warm air heating, air conditioning, and ventilating equipment.
- Class A1 Class "A1" license shall be issued to a person desiring to enter into the business of performing work on detached one (1) and two (2) family dwellings and townhouses not more than three stories above-grade in height with a separate means of egress and their accessory structures constructed under the International Residential Code on warm air heating and cooling (air conditioning) installations, and service replacements. The "A1" license excludes hotels, motels, and any housing units as established by the
- Class B license shall be issued to a person desiring to enter into the business of installing, altering, or repairing boilers, hydronics, steam heating, and solar systems.
- Class D license shall be issued to a person desiring to enter into the business of installing, altering, or repairing of refrigeration piping of kitchen equipment or equivalent such as: walk in coolers, walk in freezers, dairy cases, ice machines and the refrigerant piping of comfort cooling equipment only.
- Class E Class E license shall be issued to a person desiring to enter into the business of installing, altering, or repairing any or all of the consumer gas piping from the point of delivery to the gas cock preceding the appliance.
- Class "E1" license shall be issued to a person desiring to enter into installation, altering, or servicing of any or all of the consumer gas piping from the point of delivery(meter) to the gas shut-off valve immediately preceding the appliance on detached one (1) and two (2) family dwellings and townhouses not more than three stories above-grade in height with a separate means of egress and their accessory structures constructed under the International Residential Code and provided it is under one P.S.I.G. and less than 2 ½" inside diameter pipe. The "E1" license excludes hotels, motels, and any housing units as established by the *International Building Code* (such as group homes, boarding houses, halfway houses and similar uses).
- Class F license shall be issued to a person desiring to enter into the business of installing prefabricated fireplaces, gas logs, Franklin stoves, inside barbecue burners or pits, and inside charcoal pits.
- **Solar Systems**Class B license, Illinois Plumbing Contractor registration, and Illinois Plumber's license required.
- Geothermal Class A license, Class B license, Illinois Plumbing Contractor registration, and Illinois Plumber's license required.



Construction and Development Services 425 East State Street Rockford, IL 61104

Mechanical License Examination Application

This form must be completed in full. The statements must be attested to by a Notary Public. Failure to comply with the above instructions will delay action on this application.

When completed, this form must be presented to Construction & Development Services, Mechanical Division.

TO BE FILLED OUT BY THE APPLICANT FOR APPLICATION

Name of individual applying for license:			
Address:	City	State	
Phone: Email:			
Business name of person, firm, or corporation to whom pe	ermits are to l	pe issued:	
,			
Address:	City	State	Zip
Phone: Email:			
Circle Class(es) of license applied for: A A1	B D	E E1	F
Are you currently licensed as a mechanical contractor in a	any other mur	nicipality or st	ate?
YES* NO * if yes, please attach notarized documentation of license(s)			
Is this a re-submission? YES	NO		
Mechancial License Class Original Application	on Date		

Education

	School and Address	Year Graduated
College/University		
Trade/Vocational		
Other		
Courses comple	eted relevant to License applying for :	
School and Address	Course Description	Date Completed
-		
-		
S		
Applicable corti	lications and licanosa.	
Description	fications and licenses: City and State	Date Completed
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Work History

lame of Company/Business:	From (M/Y)	To (M/Y)	Type of Business	Phone Nun	nber
treet address		City		State	Zip
ob Title			Supervisor's Name		
ob duties:					
lame of Company/Business;	From (M/Y)	To (M/Y)	Type of Business	Phone Nun	abor
iame of Company/Business,	(IVI/ F)	10 (101/1)	Type of business	Phone Num	ibei
Street address		City		State	Zip
lob Title			Supervisor's Name		
ob duties:					
Jame of Company/Business*	From (M/Y)	ITo (M/Y)	Type of Business	Phone Nun	nher
Name of Company/Business:	From (M/Y)	To (M/Y)	Type of Business	Phone Nun	nber
Name of Company/Business:	From (M/Y)		Type of Business	Phone Nun	
	From (M/Y)	To (M/Y)	Type of Business		nber Zip
	From (M/Y)		Type of Business Supervisor's Name		
Street address	From (M/Y)				
Street address	From (M/Y)				
Street address	From (M/Y)				
Street address	From (M/Y)				
Street address	From (M/Y)				
Street address ob Title ob duties:		City	Supervisor's Name	State	Zip
Street address	From (M/Y)				Zip
Street address Ob Title Ob duties:		City To (M/Y)	Supervisor's Name	State Phone Nun	Zip
Street address ob Title ob duties:		City	Supervisor's Name	State	Zip
Street address Ob Title Ob duties:		City To (M/Y)	Supervisor's Name Type of Business	State Phone Nun	Zip
Street address Ob Title Ob duties: Jame of Company/Business:		City To (M/Y)	Supervisor's Name	State Phone Nun	Zip
Street address Ob Title Ob duties: Jame of Company/Business:		City To (M/Y)	Supervisor's Name Type of Business	State Phone Nun	Zip

Experience and Qualifications

Describe your experience and qualifications for each class of license that you are applying for. Be sure to include job duties (installation, service, etc.) and all other relevant information. **Be specific.**

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Applicant applying for License					
	signature and date				
APPLICATION AND ALL	APPLICATION AND ALL ATTACHMENTS SHALL BE NOTARIZED				
State of Illinois County of Winnebago					
	is a legal resident of				
County of	State of	being sworn before me,			
and that all statements are tru to the best of my knowledge	and belief.	Sworn and subscribed to me this			
day of		at,			
County of		and state of			
Notary Public					